K

RDA 1159

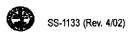
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Judicial Single - Candidate Committees

NAME OF CANDIDATE
3. ELECTION DATE
5 8714
State Zip Code Phone
#185 Chatta nooga, TN 37465 423-400-4363
State Zip Code Phone
inal Mantain TN 37377 423-886-6598 If applicable) 6. NAME OF POLITICAL TREASURER
e Kimberly Lawrence
DURTH PRE- PRE- MID-YEAR YEAR-END
JARTER PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.b. ENDING DATE OF REPORTING PERIOD
9 30 14
sures because contributions (including in-kind) received total \$1,000 or less AND
orting period. (Complete items 12d., 12e. and 12f.)
nancial disclosure because contributions (including in-kind) received total more than \$1,000 or this reporting period.
11. SIGNATURE OF POLITICAL TREASURER
I do solemnly swear or affirm that the information contained in thiscampaign financial disclosure report is true and accurate. Additionally, I swear or
affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as
defined by the federal internal revenue code.
te Signature of Molitical Treasurer Date
Nous Male World
Signatue of Witness Date
s 14.188 ²¹
s <u>-0</u> -
s 2,200 °°
s11,988 ²¹
s - 0 -
SMG 6-130 HUZ
NOS NOTJIMAH Page 1 of 7

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (Ja Full)	14. REPORT COVERING THE PERIOD								
Judge Davio Bales Committee	FROM: 7 29 14 TO: 9 36 14								
RECEIPOS 15. CONTRIBUTIONS (other than loans and interest)	, , , , ,								
a. Uniternized Contributions (\$100 or less from each source this period)\$									
b. Itemized Contributions (over \$100 from each source this period)\$									
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$									
16. LOANS RECEIVED THIS REPORTING PERIOD	\$								
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$								
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s								
DISBURSEMENTS									
19. EXPENDITURES (other than loan payments)									
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage, gasoline)								
<u> </u>									
\$									
\$									
\$									
\$									
\$ \$									
\$ \$									
\$									
\$									
	_								
Total of Expenditures (\$100 or less each payee)	\$ <u>()</u>								
b. Itemized Expenditures (Over \$100 each payee this period)	**************************************								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)									
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 0								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	a700								
22.IN-KIND CONTRIBUTIONS	,								
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$								
b. Itemized in-kind contributions (over \$100 from each source this period)	b. Itemized in-kind contributions (over \$100 from each source this period)\$								
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b	o.)s								
23. OBLIGATIONS									
a. Unitemized Obligations Outstanding (\$100 or less each)	\$								
b. Itemized Obligations Outstanding (Over \$100 each)	\$								
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$									



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COM	···· A·· ·	~	2. REPORT COVE	· · · · · · · · · · · · · · · · · · ·				
Judge DAVI	<u>o Gales (</u>	مصمث	1+tee FROM-7 39 14	TO: 9 30 14				
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)								
First Name	Middle Name	•	Contribution Received For:	Amount of Contribution				
ast Name/Organization Name	<u> </u>		Primary Election General Election					
Address	v 		Runoff (Local Elections Only)					
City	State	Zip Code	Date of Contribution	Aggregate This Election				
Occupation:		<u> </u>						
Employer								
First Name	Middle Nan	70	Contribution Received For:	Amount of Contribution				
Last Name/Organization Name			☐ Primary Election ☐ General Election					
Last Harris Cigaritation Harris								
Address			Runoff (Local Elections Only)					
Crty	State	State Zrp Code Date of Contribution						
Occupation			<u> </u>					
Епірюуєг			*	**				
			i i	1				
Circle Manua	Mirtie Nor	,	Contribution Received For	Amount of Contribution				
First Name	Middie Nar	ne	Contribution Received For:	Amount of Contribution				
First Name Last Name/Organization Name	Mickle Ner	пе	Contribution Received For: Primary Election General Election	Amount of Contribution				
	Middle Nar	ne		Amount of Contribution				
Last Name/Organization Name	Middle Nar	Zip Code	Primary Election General Election	Amount of Contribution Aggregate This Election				
Last Name/Organization Name Address			Primary Election General Election Runoff (Local Elections Only)					
Last Name/Organization Name Address City			Primary Election General Election Runoff (Local Elections Only)					
Last Name-Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election				
Last Name/Organization Name Address City Occupation Employer		Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For.					
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution	Aggregate This Election				
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For.	Aggregate This Election				
Last Name/Organization Name Address City Cocupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election	Aggregate This Election				
Last Name/Organization Name Address City Occupation Employe: First Name Last Name/Organization Name Address	State Micdle Na	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Faceived For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution				
Last Name-Organization Name Address City Cocupation Employer First Name Last Name/Organization Name Address City	State Micdle Na	Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Faceived For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution				
Last Name/Organization Name Address City Cocupation Employer First Name Last Name/Organization Name Address City Cocupation	State Micdle Na State	Zip Code Zip Code	Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Faceived For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1 NAME OF CANDIDATE OR COMMITTEE BOLES COMMITTEE FROM 7 29 14 TO 9 136 14									
Dudge DA	<u>no l</u>	Sale	s Comm	1740	FROM 7 29 14	TO 9 36 119			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)									
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)									
First Name Middle Name			In-Kind Contribution Receiver	d For: General Election	Value of In-Kind Contribution				
Last Name/Organization Name			Runoff (Local Election						
Address				Date of in-Kind Contribution Aggregate this Election					
City State Zip Code			Description of In-Kerd Contribution						
Occupation	Employer	·	· · · ·						
First Name	•	Middle Nam	e	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name		1		Runoff (Local Election					
Address	• •			Date of in-Kind Contribution	<u>- </u>	Appregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Cocupation	Employer								
Frst Name Middle Name				In-Kind Contribution Received For: Pomary Election General Election Value of In-Kind Contrib					
Last Name/Crganization Name			Runoff (Local Election						
Apdress			Date of In-Kind Contribution		Aggregate this Election				
Cey		State	Др Со се	Description of kr-Kind Contribution					
Occupation Employer				:					
First Name	<u> </u>	Middle Nan	ne.	In-Kind Contribution Receive	od For	Value of In-Kind Contribution			
Last Name/Organization Name		J		1 🗀 🤺	General Election				
Adoress		<u> </u>		Date of in-Kind Contribution	Aggregate this Election				
Sity	······································	State	Zip Code	Description of In-Kind Contribution					
Cocupation	Employer	<u></u>	<u> </u>						
		lse2# **							
First Name	······································	Middle Nam		In-Kind Contribution Receive Primery Election		Value of In-Kind Contribution			
Last Name/Organization Name			Runoff (Local Election	ns Only)					
Address				Date of in-Kind Contribution Aggregate this Election					
City		State	Zip Code	Description of In-Kind Contribution					
Cocupation	Employer								
5. TOTAL ITEMIZED IN-KIND CO									
(Carry forward to eem 3 of next page if a (if this is the last page of in-kind contribu				r.)					
SS-1128 (Rev. 2/06)				Paç	ye of	RDA 1159			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE 1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD FROM: 7/29/14/10: 9/30/14							
తో 3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount						
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)							
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Address Address Address Address			Adverti	sing	2,2000		
Cha HANDORA	State V	Zip Code 3 140 2					
First Name	Middle Nar		Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u>i</u>	•					
Address				:			
City	State	Zip Code					
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address	_						
City	State	Zip Code					
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name					:		
Address							
City	State	Zip Code					
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code		· · · · · · · · · · · · · · · · · · ·			
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must					3,260 °°		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

A MANE OF OMBIDATE	- AD AALBUTTEE						1.	DEDODE	00)(50	INO THE DEDIAG
NAME OF CANDIDATE OR COMMITTEE							_		COVER	ING THE PERIOD
Jage DAVID Boles Como					. 44.	0 -	-	тком: 1129 1	ıu	10:
3. COMPLETE THE APPR	ROPRIATE ITEMS	FOR FACH I	ITEMIZ	ED LOAN I	loans totaling r	nore than \$100	from any sou	rce during the ne		1130/11
							,	g p.		
Complete the Following for the First Name	ie Source of the Loan Middle Nar	me		Outstanding I	nan Ralance	Loans		Loan	Oute	standing Loan Balance
Filst Walle	Wilddle Nai	116		(Beginning		Receive	d F	Payments	Outs	(End of Period)
Last Name/Organization Name				1		ŀ				
								-		
Address				Loan Receiv	ed For:			Date of Loa	30	
City	State Zip Code				Election	☐ General	Election			
	1			☐ Runoff	(Local Elections	Only}				
	List All Endo	rsers or Guar	antors fe	or Above Loa	n (If more spa	ace is needed	d please atta	ch a page)		
First Name		Middle Nam	е	·	First Name	,		•	Middle	Name
Last Name/Organization Name					Last Name/Or	ganization Nan	ne		J	
Last Mainer Cryanication Maine					Last Name/Of	yanzauun Nan	ik.			
Address		·			Address					
		1	T=: -		_				1.	T
City		State	Zip Ci	ode	City				State	Zip Code
Amount Guaranteed Outstanding			<u> </u>		Amount Guara	inteed Outstand	ding		1	
		_								
First Name		Middle Nam	8		First Name				Middle	Name
					Latter Consists Day					
Last Name/Organization Name					Last Name/Organization Name					
Address				•	Address					
		127	1							
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding			<u> </u>	***	Amount Guara	inteed Outstand	ding		'	<u>.</u>
First Name		Middle Name	e		First Name				Middle	e Name
Last Name/Organization Name		1			Last Name/Or	 ganization Nan	ne			
Address					Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstand	ding			
First Name		Saladai - Sa			Cimtal				Lacre	Name
rırsi Nam e		Middle Name	₽		First Name				Middle	Name
Last Name/Organization Name		·			Last Name/Or	ganization Nam	ne ne			

Address					Address					
City	•	State	Zip Co	ode	City State Zip Code				Zip Code	
Amount Guaranteed Outstanding		<u> </u>	<u>.J</u>		Amount Guara	nteed Outstand	ding		1	
	<u> </u>									
	4. Totals for all Loans (complete on last page of itemized loans) Outstanding Loan Balance Loan Outstanding Loan Balance									
{Total loans received should also be shown in item 16. on summary page.} (Total loan payments should also be shown in item 20. on summary page.}					(Beginning	or Period)	Received	l Payπr	ients	(End of Period)
(Total outstanding loan balance si	hould also be shown in ite	m 12.e. on front	page.)		<u>C</u>		<u> </u>	<u> </u>	<u>ノ</u>	
SS-1132 (Rev. 4/	(02)					Р	age	_ of		RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COV	ERING THE PER	RIOD
Jedge Davin Bales Commit			Outstanding Balance	FROM: 1/29	1 14 TO:	9/30/14
OBLIGATION (obligations totaling more that	PPROPRIATE ITEMS FOR EACH ITEMIZED			Debt Incurred This Period	Payments	Outstanding Balance
person/vendor at the end of the reporting p	eriod)	red to any	(Beginning of Period)	I his Penod	This Period	(End of Period)
First Name	Léidile Na			<u> </u>		
Lustiagnie	Middle Na	ime				
Last Name/Business Name			7			
Address			_			
City	State	Zip Code				
Description of Obligation	<u></u>					
First Name	Middle Na	me				
Last Name/Business Name		_				
COST TO THE POSITION OF THE PO						
Address			7			
City	State	Zip Code	_			1
ν _γ	Glate	Др сосе				
Description of Obligation		- 1				<u>.</u>
		_ .				 :
First Name	Middle Na	me				
Last Name/Business Name			_			
Address				•		
City	State	Zip Code	 			
		<u> </u>				
Description of Obligation						
51.44	1			<u>-</u> -	·	
First Name	Middle Name					,
Last Name/Business Name			-			
A-11			_[[
Address						
City	State	Zip Code	┪			
Description of Obligation	<u> </u>		<u> </u>			
Description Obligation						
First Name	46441. 14.					
Lilot statis	Middle Nar	ne				
Last Name/Business Name			7			
Address			_			
- Multipos						
City	State	Zip Code		ļ		
Description of Obligation	L	<u></u>	<u> </u>			
4. TOTALS					_	
(Total from Outstanding Balance - (End of Period) of	olumn mus	also be shown		\bigcirc [0	
in item 23b. on summary page.)						